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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Mia Love (b) Address (number and street)	ПО	☐ Check if address changed			2. Candidate's FEC Identification Number				
	913 WEST GROUSE CIRCLE		mook ii adaro	33 onangea		H2UT04023	iiiiboi			
	(c) City, State, and ZIP Code		UT	8404	<u> </u>	3. Is This New Statement (N) OR	X (A)			
	SARATOGA SPRINGS Party Affiliation	5. Office Soug		0404		rict of Candidate	(A)			
٦.	REPUBLICAN PARTY	House	jiit		UT	04				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
(a) Name of Committee (in full) Friends of Mia Love										
	(b) Address (number and street) PO Box 255									
	(c) City, State, and ZIP Code									
	Riverton				UT	84065				
 I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. 										
(a) Name of Committee (in full) Republicans Inspiring Success & Empowerment Project (RISE PROJECT) (b) Address (number and street)										
	PO Box 2485									
	(c) City, State, and ZIP Code									
	Springfield				VA	22152				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Signature of Candidate Date										
	Gia Love			[Elect	ronically Filed	07/16/2015				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

FEC FORM 2 (REV. 02/2009)

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 /
	OF OTHER AUTHORIZED COMMITTEES uding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is No candidacy.	OT my principal campaign committee, to receive and expend funds o	n behalf of my
NOTE:This designation should be filed with the prin	cipal campaign committee.	
(a) Name of Committee (in full)		_
Republicans Inspiring Success	& Empowerment Project (RISE PROJECT)	CT)
(b) Address (number and street) PO Box 2485		
(c) City, State and ZIP Code		_
Springfield	VA 22152	
	OF OTHER AUTHORIZED COMMITTEES luding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is No candidacy.	OT my principal campaign committee, to receive and expend funds of	on behalf of my
NOTE: This designation should be filed with the prin	ncipal campaign committee.	
(a) Name of Committee (in full)		
COMMITTEE TO PROTECT PR	ROSPERITY AND FREE ENTERPRISE	
(b) Address (number and street) PO BOX 30844		
(c) City, State and ZIP Code		
BETHESDA	MD 20824	
	OF OTHER AUTHORIZED COMMITTEES luding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is Ne candidacy.	OT my principal campaign committee, to receive and expend funds of	on behalf of my
NOTE:This designation should be filed with the prin	ncipal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		